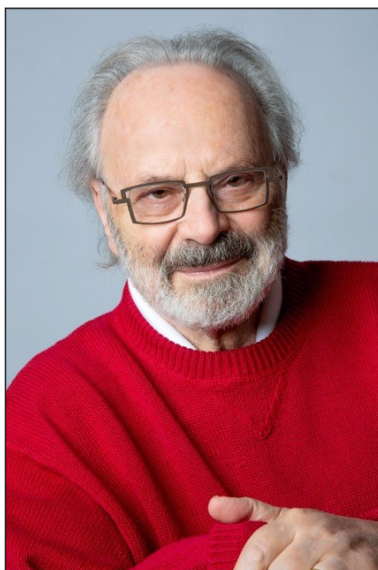


The Origins and Growth of Prenatal and Perinatal Psychology in North America

A Conversation with Thomas Verny

Kate White



“So if they (children) are not traumatized, if they are loved, instead of traumatized, if the mother and father take care of their children right from conception on, then we can have a chance at a better world because children who are loved will be peaceful, and children who are violated will violate the environment.”

— Thomas Verny

Thomas Verny, M.D., DHLT (Hon.), D.Psych., FRCPC, FAPA is the co-founder of the Association for Prenatal and Perinatal Psychology and Health (APPPAH). His career, books, and articles, leave a lasting and important legacy for the field of somatics and birth psychology.

This conversation with Kate White, Founding Director of Education for the Association for Prenatal and Perinatal Psychology and Health (APPPAH), and Founder and Director of the Center for Prenatal and Perinatal Programs covers the early days of prenatal and

perinatal psychology in North America, the publication of The Secret Life of the Unborn Child, and discussions about cellular consciousness along with Verny's most recent book, The Embodied Mind. He and Kate White are long-term colleagues, and the ease with which they engage with each other and these topics offers a warm and inspirational introduction for readers new to the subject, as well as a homecoming for experienced enthusiasts of healing earliest trauma.

■ **Kate:** *It's good to be here with you, Thomas Verny.*

Thomas: Thank you, Kate White.

■ **Kate:** *We have had a long association doing things together at the Association for Pre- and Perinatal Psychology and Health. We did the Journal together briefly, and I worked at APPPAH for six years. So, it is really good to talk with you today. I have always, always admired and respected your contributions.*

For the people who are coming to hear or read this interview, I would love to have them know you, Thomas. Many people know you as the co-founder of APPPAH with David Chamberlain, but it was your first book, The Secret Life of the Unborn Child, that put so many things on the map. Would you like to tell people a little bit more about yourself? Then we could talk about your work, your writing, and what you've done to change the world for mothers and babies and families with babies.

Thomas: It's hard to know where to start. Having worked on pre- and perinatal psychology now for more than 40 years, my immediate impulse is to begin at preconception. But we would need more than an hour to get into that. Let's start with the fact that when I was a young psychiatrist about 45 years ago, I was having a psychotherapy session with a young man, and in the midst of the session, suddenly, he started crying like a little baby.

And he continued like that. I did not interrupt him. I did not ask him any questions. He cried for about 10 minutes. Then he came out of it, so to speak. I asked him what happened, and he said he had just found himself as a baby in a little crib crying for his mother. Then, being a somewhat skeptical young lawyer, he said, "There's something wrong with this picture because I've seen photographs of my-

self in a crib. And the crib that I just found myself in right now was white. And the photographs that I've seen were always taken in a blue crib. It doesn't quite make sense."

So, I suggested that he go home and speak to his mother. He was a young man; his parents were still alive. He returned the following week for his regular session and said, "You know, this is amazing, but it seems that the first couple months after I was born, my parents did not have enough money to buy me a crib. They borrowed a crib from a neighbor, and that crib was white. Two months later, they bought me my very own crib that was blue, and that's the one that all the pictures were taken in."

So that gave me pause.

I was very well-educated. I attended the University of Toronto and Harvard. We were always taught that children before the age two or three don't remember anything, so this was impossible. It could not happen. But over the next few months, as I became a little bit more aware of the possibility of this, I heard more and more similar stories from other people.

For example, there was a radio interview with a very famous conductor in Canada named Boris Pratt. At the end of the interview, he was asked: "Where do you think your musical career started?" And he immediately answered, without thinking: "It started in the womb." So everybody, of course, was incredibly astonished. This is 45 years ago! The interviewer said, "What do you mean?" He said that he was starting to be a conductor, and sometimes, even before he turned the page, the cello lines would jump out at him. He intuitively knew, without ever having studied that particular score, what the next few notes would be. He went home to his mother, just like in my first case, and told her about that. She said, "Well, what pieces seem so

familiar to you?” He told her which piece seemed particularly familiar. She said, “That’s the one I was practicing when I was pregnant with you.”

When a few cases and stories like that came together, I began to question whether the accepted wisdom of the ages that children before the age of two or three could not remember anything was incorrect. Then, I told a very well-known obstetrician in Canada about some of these experiences. He shook his head, of course, and said, “Well, you know, next summer in Rome, there is an international conference on psychosomatic obstetrics and gynecology that takes place every four years. It’s a huge meeting, and Ronnie Laing, a famous Scottish psychiatrist, will be there.” Many, many, very, very famous, well-known people, like anybody who was anybody, were going to be there – except me, who was nobody.

I was very young. I had written one book on group therapy. But apart from that, I was unknown. So, I submitted a paper called *The Psychic Life of the Unborn Child*. To my absolute surprise, not only was it accepted, because, as I said, I was unknown, but my presentation was put on the main morning program with all the big names, including Ronnie Laing. I had 20 minutes, and I presented my paper. Towards the end, I could see about 500 or 600 people in the audience. I could see that everybody was really excited; it was palpable. You could feel the excitement, the energy, in the room.

I said, “Well, today at five o’clock, when all these lectures are over, if anybody wants to come and talk more about this with me, please come to my room.” I told them my room number. Well, five o’clock came, and there was a long lineup of people trying to get in.

■ **Kate:** *Wow.*

Thomas: Exactly. I got to know some of these very important people. After the meeting, I wrote down their names. When I returned to Toronto, I started corresponding with them, continuing our conversation. I could see from their responses and from some of the evidence, studies, and research I was collecting from them that there was a book in this. So that’s when I decided to write *The Secret Life of the Unborn Child*. It was picked up in New York, and 15 publishers were eager to print it.

■ **Kate:** *Wow. That’s a great story.*

Thomas: It was, Kate. It was absolutely amazing. I went to New York, and every hour on the hour, I had an appointment with a different publisher.

■ **Kate:** *That’s so exciting.*

Thomas: I would jump into a cab, go to the next publisher, go to the washroom, wash my face, try to refresh myself, and go in. Essentially, they were interested in whether I could talk like I’m talking to you now. Could I speak freely on television? Because at that time, television was really big. They liked it as long as I could put two words together and make some sense. I guess they liked my beard and my accent, you know, like a typical psychiatrist.

■ **Kate:** *I guess you needed a pipe.*

Thomas: Yeah, I had a pipe.

Then, they started bidding on the book. I must say, that was one of the most exciting periods of my life. I would be in my office in Toronto, and my agent would call me every two or three hours and say, “We have ten thousand dollars from this and this publisher. Now we have twelve thousand dollars from that publisher. Should we accept?”

And so it went.

It got published.

That’s how I got to know David Chamberlain, whose name you mentioned. He is a wonderful, wonderful man. Once the book was published, I got to know so many people; they started writing to me. I told David that we should really present our ideas at the American Psychological Association.

And he said fine, being a psychologist. He submitted an abstract for our paper. Of course, it was rejected. So I said to David in a moment of, I don’t know, but not thinking, why don’t we form our own association?

And he said okay. And so we did.

■ **Kate:** *So you did.*

Thomas: Just the two of us – no computers, no money, no association, no support from anybody. Just my secretary, who I had in my office, and a number of people around me, including my wife and some other people. We started planning a big meeting in Toronto. We invited everyone. I advertised in local newspapers.

On the night before the opening of the Congress in Toronto, we had about 100 people registered. I was sick to my stomach, thinking that we would have only 100 people because the expenses were huge. A hundred people would not cover it.

And I was paying for it all out of my own pocket because there was no association. So it was just me financing the whole thing. Then, I went to the University of Toronto, where the meeting was to take place. I saw a long lineup of people trying to buy tickets. We ended up with something like 500 people.

— **Kate:** *What a great story.*

Thomas: That was the beginning.

— **Kate:** *I love this! I love hearing about the beginning, and *The Secret Life of the Unborn Child*. Your book was published in 1983, and I created the Education Department at APPPAH in 2013. And your book is still current!*

Thomas: Oh, it's still selling. It has just now been published in Slovak and Czech, and I think it will be published in Russia this year. So far, it's been published in 35 countries.

— **Kate:** *You've written others. If I remember correctly, you wrote a prenatal communication book on prenatal parenting.*

Thomas: I've published eight books.

— **Kate:** *You have many presentations that are well-known for how well-documented they are, and for how you focus on the underlying science. That's one of the things I loved about APPPAH and you and David Chamberlain. David was also great at footnoting. I would go through your articles to make sure, because I also love that. Your work is still current and still applicable if anybody really wants to investigate it.*

Thomas: That's right. *The Secret Life of the Unborn Child* is very easy to read. That's the thing that people really like about my writing, that it's very accessible. I always put myself in the position of the reader rather than the writer. And I ask myself, is this clear?

— **Kate:** *A person who does not have a university education and is not an academic can still understand it.*

Thomas: I also like to bring in a lot of case material to make it come alive.

— **Kate:** *I've read everything you've written, at least that I know of, even some of the chapters in textbooks. I attend your talks. You always have wonderful materials. You're a very popular speaker, and it is fun to watch you be so honored.*

So, for those people reading this interview who are not involved with pre- or perinatal psychology, what we know is that the baby receives information. It has a way of coming in, whether it's through the cello like you're saying, the music, or that memories can be generated from their time in utero during birth and after birth. You're saying that these memories have lifelong implications on how we develop. And my goodness, science has come a long way.

Thomas: Yes.

— **Kate:** *It is so wonderful to support all these things and see that the field is really changing and accepting that babies have experiences and that they remember them. One of my favorite quotes of yours, Thomas, is, "I used to duck pies, and now they serve me pie."*

Thomas: Did I say that? That's good. I like that.

— **Kate:** *So our time really has come for those of us who love this field the way we do. It has come of age. For those body psychotherapists who are curious about the implications of earliest trauma, let's talk about what we are taught and what we can teach about these early layers of experience. What, in your opinion, are we talking about when we say "early memories?" How would you summarize if you could?*

Thomas: Well, my answer is layered because there are several answers to that question, depending on which lens and terms you use.

If you are looking at it psychologically, what people remember consciously, or what they can get in touch with unconsciously, then, of course, the important thing is that everything that the child experiences from the end of the second trimester on – and I will go back to that in a second – is remembered, it's inscribed in their memory banks. Just because they can't remember doesn't mean it didn't happen. It doesn't mean that it doesn't exert a certain gravitational pull on everything they do for the rest of their lives. This is what we have to

keep in mind: just because you can ask a child what they remember about their birth, and they say nothing doesn't mean that they don't remember it on some other level.

■ **Kate:** Right.

Thomas: In fact, we know they can remember birth in many different ways. For example, without any drugs or hypnosis, there have been many, many instances where mothers have reported that when they bathed their two-and-a-half or three-and-a-half-year-old child, and the child was relaxing in nice warm water, and she asked without pressure, "What do you remember about your birth?" Suddenly, a whole flow of information comes out, and they say things like,

"It was cold."

"I could move."

"Suddenly, I could move. I was no longer somehow bound in something."

Stuff like that, they will tell you.

■ **Kate:** Yes.

Thomas: Obviously, these children know what happened to them. But what does that mean in terms of body therapy? Well, the mode of birth, for example, is very important in terms of leaving behind what one might call psychosomatic imprints. If, for example, a child is born naturally, without drugs, without forceps, just a natural childbirth, that child goes through the birth canal. She or he will get the best massage that he or she will ever get. The baby will come out on its own and feel on some level that he or she is a very competent human being, like:

"I could do this on my own."

"I'm terrific."

"This is a great world."

"I like it."

It's a whole different attitude toward life and your body. As you go through the birth canal, every part of your skin is massaged and touched, so you are very much in touch with what's happening to your body.

On the other hand, let's compare that to a forceps delivery, which I did, unfortunately, when I was studying and spent time in the obstetrical ward of a general hospital. I delivered 27 babies. I think every

one of them was with forceps. When you deliver a child with forceps, you put an incredible amount of pressure on their head. So these children, when under stress, will develop pains in the neck and shoulder region. They will also have the feeling "I can't do this on my own. I need help."

That kind of message is even more pronounced when someone is born via cesarean section because, in that procedure, one of the very important things that happens is that the child does not pick up lactobacilli, which are in the maternal vagina. They do not pick up lactobacilli, so they will have trouble digesting maternal milk because that child needs the lactobacilli.

Also, very often, in cesarean sections, the child gets stuck going down the birth canal. For that reason, the obstetrician and gynecologist will then do a C-section. That child has a very different experience, very different memories about being stuck and not being able to make it on their own. They will carry that in their bodies and in their minds.

It all goes together.

So, after writing *The Secret Life of the Unborn Child* and traveling the world talking about it, one of the things that always bothered me was the fact that I met people who could remember things before the second trimester.

I mean, all the way back to conception.

■ **Kate:** Wow.

Thomas: I had a patient, so help me God, this is the truth! In one of his sessions, he went back to conception. He could feel his mother not wanting to have anything to do with his father, while his father was trying to have sexual relations with her. The father was drunk. At one point, this man, who was in his 50s, could feel his mother's thoughts and feelings of rejecting the father: "I don't want to have anything to do with this man." The next moment, he could sort of feel the violence of his father, who just wanted to have his way. The psychological problem that brought this man to me for therapy was that he was so ambivalent.

Everything was ambivalence. He couldn't make up his mind, left or right. And so, having this primal experience of conception really helped him understand his ambivalence because he could feel his mother's ambivalence and how it affected the rest of his life.

***“But what about before six months?
How could children, whose central nervous system
was obviously not adequately developed to lay down memories,
possibly remember things?”***

■ **Kate:** Right.

Thomas: Stories like that always bothered me because when I wrote *The Secret Life of the Unborn Child*, and for many years after, I had absolutely no doubt that the science was there to support the fact that six months after conception, a child had the biological substrate for laying down memories – primitive memories of feelings and thoughts – but memories.

There’s research on that. But what about *before* six months? How could children, whose central nervous system was obviously not adequately developed to lay down memories, possibly remember things?

I was in this state of doubt until about 10 years ago when I came across a paper in one of the medical journals. Actually, it was in *The Lancet*. There are only two Bibles for medical doctors in terms of journals – *The Lancet* and the *New England Journal of Medicine*. Anything written in either is the word of God!

In this 2007 issue of *The Lancet*, there was a paper by a French doctor by the name of Lionel Fillet, who described a 40-year-old French man who came to see him because of a weakness in his left leg. They did all kinds of lab tests, as well as a skull x-ray. To everybody’s astonishment, this man had virtually no brain. Where the brain was supposed to be, there was only water and cerebrospinal fluid. He had a thin crescent of brain tissue and that was it. No cerebral cortex on either side.

Yet this man was employed in the French Civil Service—whatever that says about the French Civil Service! He was probably not any better or worse than other civil servants. So he was gainfully employed, the father of two children, and he scored 75 on an IQ test, which is below average but still functioning.

■ **Kate:** For no brain, that’s amazing.

Thomas: Exactly. How is this possible? How is it possible that a man without a brain could still function fairly well? He was gainfully employed, married, and had two children. He was well-dressed. He went to the doctor on his own. How is this possible?

That’s when I began doing research on people who were missing a brain as a result of accidents or very bad cases of epilepsy. Both children and adults sometimes have parts of their brains removed.

As I did more research, I concluded that the only way to explain how this man functioned was to accept the fact that his brain had some kind of backup system.

And the backup system, well, had to be below the neck.

It had to be the rest of the body.

I started looking into cellular consciousness and cellular memory and what our cells can do.

Very simply, what I came up with was that all the cells in the body form a network. All the cells, tissues, and organs form a network, just like the Internet. And when they work together, they are able to have a mind and a brain, so to speak, that supports the main brain in the skull. So, instead of having an “unskulled” mind, I’ve come to the conclusion that we have an embodied mind – that the whole body, the brain, neck, heart, and all the rest, have to work together in order to have a well-functioning human being.

■ **Kate:** I loved reading that in your book. You showed me your article about how memory happens before it was published. I’ve made it part of the education department at APPPAH, and very simply chunked it down so that people can get a sense of your theory of this holistic body-mind memory. So, we have all this anatomy, but we also have this vibrating network of cells and cellular memory.

I also love how you conduct all the research on the sea snail and the other award-winning research that has led to the notion that we remember our earliest lives and that our memories are in our bodies.

Thomas: Exactly.

■ **Kate:** And that's why body therapists can be so successful, because memories are also in our bodies.

Thomas: Yes.

■ **Kate:** In the book, in the chapter you gave me, you stated that memories are in the nucleus of neurons. Could you explain that a bit more?

Thomas: Well, they are in the nucleus, but they may be in other parts of the cell, as well as in its membrane – the outside of the cell. Structures in the cell may also contain memories; there are different hypotheses about where memory could reside.

■ **Kate:** The cellular membrane is definitely something that our friend Bruce Lipton talks about. He has written about epigenetics.

Thomas: Bruce Lipton writes a lot about that. He writes about the cell membrane as the brain of the cell. That's one way of looking at it. But I think that's just one part of the brain of the cell. There are other structures in the cell itself and in the nucleus, which, of course, contain DNA. So, DNA in every cell has the blueprint for what that particular cell is supposed to do, and it's incredibly complex.

Yet, a cell is so small that you cannot see it with the naked eye. In our culture, we admire things that are large and kind of deprecate things that are small. Cells are incredibly small, but they are incredibly complex little machines. When you study cells, a whole new world opens up to you. Cells have little organelles – I think about 33 little organelles, which are tiny, tiny replicas of the organs in our bodies. For example, we have lungs, and the cells have mitochondria in charge of energy, providing energy for all the work the cell has to do. The cell has to produce proteins. It's just incredibly complicated.

There's absolutely no reason why cells could not contain other memories. One of the best examples, of course, is heart transplants. The literature describes the fact that heart transplants often change

their recipients' personalities and they assume the personalities of their donors. I have some very good descriptions of that in my book. There's much more, of course, in the literature.

The only way to explain this is that in the transfer of cells, there is also a transfer of memories from the donor to the recipient.

There's no other explanation.

■ **Kate:** That's interesting. I know our cells die off and we reproduce them. We replace them. Different parts of the body run on different schedules. Brain cells, for example, reinvent themselves less often than cells in the gut. Although there are differences between different tissues, they all renew themselves. The memories, though, are retained.

Thomas: Exactly.

■ **Kate:** How does that happen?

Thomas: I have no idea. I really don't know. There are still a lot of unanswered questions. And I think we are probably just scratching the surface.

■ **Kate:** I agree.

Thomas: There's so much interesting new research coming out. However, the problem is that very few people are aware of this new research. DNA can now be found in thin air, in tiny fragments from long-deceased people who have walked through a forest.

Aaron Murphy, a law professor at New York University School of Law who specializes in new technologies used by police in the criminal legal system, says that new DNA collection techniques are 'like catnip' for law enforcement officials. The police have been quick to embrace unproven tools like DNA to create probability-based sketches of suspects. But what is really important is that technological advancements allow for more information to be gathered from even smaller DNA samples, which have been collected in meadows and forests from individuals who have passed through. They may long be deceased, but some of their DNA has stuck to the leaves and fibers. The results of this research were published in the journal *Nature Ecology and Evolution*. Now, how many neurologists read that kind of stuff?

■ **Kate:** Hardly anyone.

Thomas: The research demonstrates that scientists can recover medical and ancestry information from minute fragments of human DNA lingering in the environment. Now, isn't that amazing?

— **Kate:** *The science is amazing. We know so much more now about how we come into form, how our environments inform our bodies as we make them in utero, the transgenerational, intergenerational inheritances we carry, and the fact that it matters how we are born and how we're received.*

The early roots of health and disease, if you want to use that word, are all here. Body psychotherapists, or any clinicians, can take a birth history and get a better sense of who is sitting in front of them.

Thomas: Yes.

— **Kate:** *I've had the opportunity to network with brain researchers about two topics of great interest to me: the fetal brain and the placenta. Advances in prenatal care aim to predict genetic sensitivities to chemicals and early interventions, helping parents understand what to expect. I also stay updated on neuroplasticity and healing, particularly for addressing early traumas, as research in this area becomes increasingly sophisticated.*

Thomas: By the way, I hate the expression neuroplasticity.

— **Kate:** *You do? Tell me why.*

Thomas: For a second, think of plastics. They're hard. They don't change.

— **Kate:** *Okay.*

Thomas: Now, think of a cell; think of a neuron. It can do thousands of different things.

— **Kate:** *That's true.*

Thomas: It's not plastic. It has an incredible potential for change. *It's not plastic!* That's the last thing it is., Someone came up with this nice little word, neuroplasticity, and since then, everyone has accepted it without question. It's nonsensical. It's the wrong word.

It's so, so, so wrong because it doesn't tell you anything about our huge potential, our huge intelligence. Right?

— **Kate:** *Yes, yes.*

Thomas: Plastic is dead. It is not living. It cannot change. It cannot think.

— **Kate:** *Well, let's call it neurofluidity.*

Thomas: There you go. A new word that we actually coined here on this day. On this day, June 3, 2024.

— **Kate:** *Neurofluidity.*

Thomas: Absolutely.

— **Kate:** *Neuropotential.*

Thomas: Well, that's a good word, too!

— **Kate:** *Thomas, let's complete our interview by discussing your book further. It's wonderful for those of you who need data, science, and a way or a place to stand when working with systems, organizations, or even your own clients.*

I particularly would like to talk about consciousness. You told me that the chapter you wrote on quantum mechanics or quantum biology was a real challenge for you. I read it, and it resonated with me. When I teach students who are learning to work with birth trauma, because that's what I mostly do now, is to help them understand.

I discuss the concept of the vibrating network and how memories are stored within it. At the same time, I explore consciousness. For example, when we recall our birth or our conception, our consciousness, it raises profound questions about how we come into form, who we are within our bodies, and how we can start to document that, and talk about it in scientific and medical settings, but it's much more esoteric.

I would love to hear what you think about consciousness in the body.

Thomas: Well, one of the main things I concluded was that, just like I'm opposed to the expression neuroplasticity, neurologists and philosophers, or anyone dealing with consciousness, use the phrase "the mind and consciousness."

The two are often equated and seen as epiphenomena. That's a big word for function. The mind and consciousness are seen as a function of the brain. Just as urine is a function of the kidneys, the mind, or consciousness, is a function of the brain. Again, all you have to do is pause and think about that, and it doesn't make sense. Surely, mind and consciousness cannot be equated with urine.

■ **Kate:** *Right.*

Thomas: Urine, you can see and smell; you can do experiments with it; you can find out its bacterial contents and chemical components. You cannot do any of that with the mind or consciousness.

■ **Kate:** *Okay.*

Thomas: These words are abstractions. To say that the mind is a function of the brain does not make any sense. I see the mind and consciousness, and we'll come to a differentiation between the two as being the result of every cell in your body, including the brain – but not just the brain – working together to provide us with what we call mind and consciousness.

Consciousness is a little easier to define than mind. Consciousness simply means that we know who we are at this moment. I mean, I think that's probably the simplest way. I know that as I sit here at the desk talking to you, I am conscious.

■ **Kate:** *Fine.*

Thomas: When we are anesthetized, for example, we are unconscious. But that doesn't mean that we are mindless because our mind is still working. So if someone, for example, says, "Oops, I think I've just cut the main artery in her neck, the blood pressure of the person under anesthesia is going to go through the roof. Although she may be unconscious, the mind is still vigilant, still paying attention.

So, I think the mind never sleeps. And the mind is a product of every cell in our body.

I wrestled with this for months, and I read hundreds of articles and books on the topic. And there are just so many different opinions about the mind and consciousness. What seems to be very popular now is the fact that consciousness is considered to be like gravity. It's like one of the main features of our universe. It's like an energy field out there, and we're a little part of it.

I don't know about that. I am not a religious person. If you are religious, it's easy to say that God gives us consciousness. I don't know. Maybe, maybe not.

So I see consciousness and the mind being connected, and a product or outcome of all the cells in our bodies working together and giving us this sense of being who we are.

Now, the other thing that I wrestled with in that chapter, and that's part of the problem, is free will.

■ **Kate:** *Yes, I remember.*

Thomas: And so, if you are a materialist, and if you are a true scientist in the 21st-century mode of being scientific, then you really have to believe that everything is caused by something else.

Like vbnjkopnothing happens on its own. Nothing happens by chance.

If I knew all the factors that went into my conception, that went into my nine months of pregnancy, for example, I could predict with absolute certainty what I'm going to do in the next moment. In other words, there is no free will. In a materialist universe, there is no free will.

Everything is predetermined by what happened before. And if we knew, which of course is impossible, but if we knew all the factors that went into my being, and every person that I've ever encountered, and everything that I ever read, we could predict what I'm going to say in the next moment.

■ **Kate:** *Right.*

Thomas: Okay. So, that is the view of materialist science. That's where I brought in quantum mechanics and quantum physics because there is a factor of unpredictability in quantum mechanics and quantum physics. In science, all we can talk about are probabilities rather than certainties.

■ **Kate:** *Right.*

Thomas: And the other thing that's very interesting about quantum science is that when you have two particles that at one time were connected and somehow became disconnected, it's called superimposition. When you have two such particles, they could be thousands of miles apart. But if one of them turns one way, the other one will instantly turn the opposite way.

Whatever happens to one will affect the other much faster than the speed of light, which, according to Einstein, cannot happen. And since then, it has been universally accepted as scientific truth.

So once again, you know, we are confronted by something that science says cannot happen, but it is happening. It's there. It has been measured. This is not up for debate. It has been measured. This is not someone's crazy idea, certainly not mine. It has

been measured, and it cannot be explained. There is no good explanation for it.

When we look at quantum mechanics, it explains very well things that happen on a microscopic level, at a very, very small level. It seems that the physics of Einstein and all the other standard mathematicians and scientists work very well at the macroscopic level, at a large level. At the microscopic level, quantum physics works very well.

Since we are dealing with cells at a microscopic level, it seems to make sense to posit that they may be following the principles of quantum mechanics rather than the physical rules of materialism.

I think that's somehow where the mind, consciousness, and free will come in – at the cellular level. That's how I see it.

— **Kate:** *Thank you, Thomas. I read the science also, and I love the medical world. And they've gotten so much more detailed and granular about how we understand the body.*

Thomas: Yes, yes.

— **Kate:** *What they consistently say is that there are mysteries still afoot.*

Thomas: Yes.

— **Kate:** *We try so hard to define all these things in our human world, and yet mysteries are still here. And that's part of the joy of being human, so we can trust into some greater mystery. As John Chitty, one of my teachers, would say, "Greater forces are at work here."*

Thomas: Yes, yes.

— **Kate:** *So we are these conscious beings; our consciousness is in our bodies. If you could bring someone to be more conscious about their patterns and their lives, then they can be more intentional and have more happiness, which is what we all want.*

Thomas: Absolutely, absolutely.

— **Kate:** *And more in control of their lives, right?*

Thomas: Yes, not so much at the whim of these early memories or even our lifelong challenges to have more consciousness. The traumas and stresses that we have all suffered, you know, are not through any failures on our part; they are not our fault.

— **Kate:** *Right. But it's life, right?*

Thomas: It is life.

— **Kate:** *Well, just before we complete here, Thomas, I'd like to ask how you see the future for our field of pre- and perinatal practice, and also for humanity.*

Thomas: Well, it's hard to be positive at this moment in time when there is so much trauma all around us in the world. Right?

— **Kate:** Yes.

Thomas: I mean, everywhere you look, there is suffering. People are dying in every corner of the world. And even here in North America, one of the richest places in the world, there are homeless people on the street; there are children dying of hunger and malnutrition.

We are going through some pretty difficult times, but it seems to me that the world has done this before. There seems to be some kind of repetition of patterns where, for a while, there is contraction, like in the Dark Ages. Then came the Renaissance, and everything came to light and to life. And then again, you know, there is a withdrawal.

So there is kind of a sine wave up and down, up and down.

I think we are in a downward spiral right now, but hopefully, we can come out of it.

One way that we could have a chance of coming out of it is by making sure that our children are conceived in love, that they are carried for nine months in the body of a loving mother, and that they are born into the hands and arms of loving parents. You know, loved children will be good shepherds of this intention.

And unloved children have in some ways been traumatized in the womb, perhaps because their mother or father were drinking too much or taking too many recreational drugs, or any of those things that can be incredibly bad for the unborn child.

Physically and psychologically, they will not be born the way that they were supposed to.

So if they are not traumatized, if they are loved instead of traumatized, if the mother and father take care of their children from conception onwards, then we can have a chance at a better world because children who are loved will be peaceful, and children who are violated will violate the environment.

■ **Kate:** Yes. Well, thank you, Thomas. Thank you for your time today, and thank you for this interview.

Thomas: Thank you, Kate, and good luck to you in all the important work that you do.



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